

PATENT NUMBER

U.S. **UTILITY** Patent Application

**O.I.P.E.**

**PATENT DATE**

**SCANNED**

DA

APPLICATION NO. 09/849580	CONT/PRIOR D	CLASS 340	SUBCLASS 500	ART UNIT 2632	EXAMINER Lee B
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## APPLICANTS

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**TITLE**

Patient point of care computer system

PTO-2040  
12/99**ISSUING CLASSIFICATION**[illegible]

<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>		<b>CLAIMS ALLOWED</b>			
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.	
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner)		<b>NOTICE OF ALLOWANCE MAILED</b>  _____			
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____  _____  _____	_____ (Primary Examiner)		<b>ISSUE FEE</b>  <table border="1"> <tr> <td>Amount Due</td> <td>Date Paid</td> </tr> </table>		Amount Due	Date Paid
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_____ (Date)		<b>ISSUE BATCH NUMBER</b>				
<input type="checkbox"/> The terminal ____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner)		_____ (Date)			
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